Clinton Township Recreation and Courtside Racquet Club presents:

Pickleball at Bundt Park

All programs are 4 classes per each month / Each class offered at a 4 student maximum

Adult Beginner and Advanced Beginner: \$120. Per Adult Reside	ant / \$150 Par Adult Non-Resident
Addit beginner and Advanced beginner. \$120. Fer Addit Reside	ent / \$150. Fet Addit Noti-Resident

Beginner (1 hour classes)

Focus on basic strokes and rules.

SEPTEMBER/SESSION 1.

- Mondays: September 11, 18, 25, & October 2
 6:00 7:00 pm OR 7:00 8:00 pm
- Thursdays: September 7, 14, 21, 28 9:00 - 10:00 am OR 10:00 - 11:00 am OR 11:00 - 12:00 pm
- Saturdays: September 9, 16, 23, 30
 11:00 12:00 pm OR 12:00 1:00 pm

OCTOBER/SESSION 2.

- Mondays: October 9, 16, 23, 30
 6:00 7:00 pm OR 7:00 8:00 pm
- Thursdays: October 5, 12, 19, 26 9:00 – 10:00 am OR 10:00 – 11:00 am OR 11:00 – 12:00 pm
- Saturdays: October 7, 14, 21, 28
 11:00 12:00 pm OR 12:00 1:00 pm

Advanced Beginner (1 hour classes)

Sharpen strokes and team strategy in doubles play.

SEPTEMBER/SESSION 1.

- Mondays: September 11, 18, 25, & October 2
 6:00 7:00 pm OR 7:00 8:00 pm
- Thursdays: September 7, 14, 21, 28 9:00 - 10:00 am OR 10:00 - 11:00 am OR 11:00 - 12:00 pm
- Saturdays: September 9, 16, 23, 30
 11:00 12:00 pm OR 12:00 1:00 pm

OCTOBER/SESSION 2.

- Mondays: October 9, 16, 23, 30
 6:00 7:00 pm OR 7:00 8:00 pm
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- Saturdays: October 7, 14, 21, 28 11:00 – 12:00 pm OR 12:00 – 1:00 pm

Please save top half of form for your scheduling reference.

Please call: (908) 713-1144 if you have any questions.

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Clinton Twp. Recreation: Pickleball at Bundt Park Due to limited space, please list first and second choices.

Name of Participant:						
Telephone Number: ()		E-mail:				
Address:		City:		State:	Zip:	
Adult INTRO to Pickleball: Please ched	eck level 🔲 Beginner	Advanced Beginner				
1st choice – Month (please circle) Sep	ptember -Session 1	Day (please circle) Monday	OR Thursday	OR Saturday	Indicate Time:	
2nd choice – Month (please circle) Oct	tober –Session 2	Day (please circle) Monday	OR Thursday	OR Saturday	Indicate Time:	
Amount Enclosed: \$	Please in	ndicate: Credit Card:	MasterCard	VISA	AMERICAN EXPRESS	
OR: Check Enclosed, payable to	o:	Card No:_				Exp. date:
Courtside Racquet Cl	lub	Signature:_				
Please return completed for to: Courtside Racquet Club, 1115 State Route 31 South, Lebanon, NJ 08833						

Release Statement: I, the Undersigned, an adult participant—or guardian of participant—of legal age, hereby agree that I will abide by the rules of Courtside Racquet Club, LLC (hereinafter "Courtside") and I hereby release, discharge, and/or otherwise indemnify Courtside, its owners, officers, employees and instructors against any claim by or on behalf of myself or any third party arising out of my involvement in any activities at Courtside. In the event that participant is unable (or can not be reached in case of guardian participant), for any reason, to make such decisions, I hereby authorize and consent to be transported for emergency medical care, if necessary, and for such emergency medical treatment as may be determined to be in my best interest by the appropriate medical personnel, and I hereby release and hold harmless Courtside in connection therewith. For good and valuable consideration I hereby consent to and authorize the reproduction, for publication use by Courtside for promotional materials, use of any photograph of me and use of my name in such promotional materials. (If you have any questions please give us a call).

— By enrolling in this program I agree to the above release.

Date:	Print Name:	Signature:
Dutc	Time rame.	orginature.